Substitute t	or form 1449A&B/PTO			Complete if Known		
				Application Number	10/046,654	
INFO	RMATION DIS	CLOS	URE	Filing Date	October 26, 2001	
STAT	EMENT BY A	PPLIC	ANT	First Named Inventor	Neofytides, Cheryl L.	
				Art Unit	3691	
l '	Use as many sheets as r	necessary)		Examiner Name	Akintola, Olabode	
Sheet	1	of	3	Attorney Docket Number	020375-000220US	

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STATEMENT BY APPLICANT				First Named Inventor	Neofytides, Cheryl L.	
				Art Unit	3691	
(Use as many sheets as r	necessary)		Examiner Name	Akintola, Olabode	
Sheet	2	of	3	Attorney Docket Number	020375-000220US	

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Examiner Signature		/Olabode Akintola/ (07/29/2008)	Date Considered	_			

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